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ABSTRACT

The purpose of this study is to provide information on the number and racial composition of students and workers in selected health care professions in the State of Alabama, and to analyze these data. Professions covered include dentistry, dental hygiene, nursing, medicine, medical technology, and occupational therapy. A description of how data were obtained is included. An analysis of the data includes statistical information. Five tables of data supplement this analysis. Conclusions of the study include the following: (1) there is a shortage of blacks in all but the lowest level of the health care professions; (2) the longer the educational process, the smaller the percentage of blacks entering into the profession; (3) training programs in educational institutions have a higher percentage of blacks than at hospitals or in apprenticeship type programs; and (4) at the lower professional levels, blacks have been trained mainly at formerly all black institutions. It is noted that exceptions to these observations exist. (Author/PMR)

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MANPOWER STATUS OF SELECTED HEALTH PROFESSIONS FOR THE STATE OF ALABAMA

by

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Focus of the Study

This study is concerned with the total number of workers in selected health care areas in the State of Alabama, number and percent of these workers who are Black, total number of students in programs leading to careers in these professions, total number and percent of these students who are Black, and an analysis of the data.

The purpose of the study is to provide factual information on the total number and racial composition of students and workers in selected health care professions in the State of Alabama at the date of the writing of this report.

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Sources of Data for Workers in the Professions

The data on workers in the selected health care professions were obtained from a number of sources and are individually cited in Table 1. The information on the total number of workers in the Dental and Dental Hygiene professions was obtained from the 1974 directories for these professions. The Licensed Practical Nurse and Registered Nurse totals were obtained from the Executive Director of the Alabama Board of Nurses. The Medical Technology and Medical (Physicians, Medical Doctors and Doctors of Osteopathy), totals were obtained from a study by the Health Manpower Planning "A" Agency for the State of Alabama (July 1972).

All information on workers in the Occupational Therapy profession was obtained from the President of the Alabama-Mississippi Occupational Therapy Association. These data are believed to be accurate or nearly so and should differ from the true values only by changes that have taken place since their compilation. However, it is not known whether or not all active therapists are members of the Association but, because of their small numbers, the figures are believed to be accurate or nearly so.

Racial composition figures of the workers in the various professions were obtained from knowledgeable individuals in four professions (Dentistry, Dental Hygiene, Occupational Therapy, and Medicine).

In three of these four professions the numbers were separately verified by additional inquiry, and in the fourth case the data were supplied by the President of the Alabama-Mississippi Occupational Therapy Association and were not checked.

These additional inquiries included writing separate letters to every known Black person in the Dental Hygiene and Dental professions requesting either additional information or verification that the list of Black dental hygienists was complete. In every instance the respondent was unable to add to the list (about half of the dental hygienists and one fourth of the dentists responded).

The list of Black dentists was supplied by a former official of the Alabama Black Dental Association and verified by an official of the State Health Department (Dr. Naseeb Lein Shory).

The list of Black physicians was compiled by a Black physician for the Executive Director of Medical Association of Alabama, and was believed by the Director to be a complete enumeration. The data for these four professions are believed to be accurate or nearly so and should differ from the true values only by changes that have taken place since their compilation.

The racial composition of the Licensed Practical Nurse and Registered Nurse professions was estimated from randomly sampled data from the files of the Alabama Board of Nurses. These sample estimates are within four and three percent, respectively, of the true

values unless an unusually poor sample was taken. The race of the applicant had been determined by visual inspection of the applicant's photograph.

Two sample surveys and a population enumeration were conducted to obtain estimates of racial composition in the Medical Technology profession. There are three groups within this area that were surveyed: Alabama State Society of Medical Technologists (ASSMT), Registered Medical Technologists (RMT), and American Medical Technologists (AMT). A sample survey of 98 from a roster of 148 was taken for the ASSMTs; a file of 469 members of the RMTs was completely enumerated; and a sample survey of 186 from a roster of 224 was taken from the AMTs.

The overlap of members who belong to more than one group was estimated from the results of the surveys and the population enumeration, and was accounted for in the final estimates. The sample surveys consisted of the original mailing and one follow-up mailing to the non-respondents. Those who returned the questionnaire were assumed to be representative of the profession. Based on these returns and the population survey of the RMTs, the estimate of racial composition for this group is computed to be within one percent of the true value.

These estimates are, however, believed to be suspect. State laws do not require a practicing medical technologist to be licensed. One can become a medical technologist simply by acquiring a position in the area without regard to any state-wide standards. In most, but

apparently not all cases, the applicants are required to meet certain levels of competency which are, in turn, not uniform over the State. This lack of control of standards on a statewide basis has led to organizations that are loosely organized and loosely defined; that is, one may or may not join an organization after he meets the training and/or job requirements for entry into the profession.[2] Many practicing medical technologists apparently do not belong to any of the cited organizations and, hence, are not included in the surveys. Evidence from other health care areas, such as the medical and dental associations, indicated that Blacks do not participate in organizations to the extent that Whites do; hence, these estimates are likely to under-represent, by an unknown quantity, the number of Blacks who are working as medical technologists.

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[2]Mr. James Weed, Anniston, Alabama (Secretary/Treasurer of Registered Medical Technologists, State of Alabama), Comments and Correspondence with the Author.

Sources of Data for Students

Enrollment figures and racial composition of the student population were obtained directly from each institution and are cited in Tables 3, 4, and 5 (with the exception of one institution whose representative declined to supply the needed information). Separate letters were sent to each institution cited by the State Comprehensive Health Planning "A" Agency as having a training program in the selected health care areas requesting the information given in Tables 2, 3, 4, and 5. A follow-up letter was sent to the non-respondents after a two to three week period. Finally, telephone calls were made to each institution that still had not responded. In most instances, enrollment figures were requested for the entire year, with care being taken to count an individual student only once. The most usual period given was from July, 1973 to July, 1974. In some instances, these figures were not readily available, and the respondent gave enrollment and racial composition figures at a particular point in time, such as the fall of 1973 or the end of the spring term in 1974. These figures were used when there was only one enrollment period during the year, and data for the entire year were not available.

Data were usually supplied by an administrator or school official, and sometimes by instructors in the program. In all cases, the best available source was found to supply the data. In two cases

the data did not exist in usable form, and the respondent gave information on students who were enrolled in other programs, such as biology, and had declared in some way their intention to go into a health care profession. Estimates for these two cases are footnoted in the tables and are to be considered as gross estimates of the numbers who will eventually go into the health care professions from those programs.

The overall impact of these two estimates on the totals and racial composition figures is believed to be negligible. Further, the figures cited were obtained from instructors who were vitally concerned with the program, who were familiar with the students' choice of future profession, and who had a historical perspective of past student decisions and a feeling for the likelihood that these choices would be fulfilled. Figures from all other programs are believed to be accurate or nearly so, and do represent the best available student enrollment data in the cited health care areas.

A subjective evaluation of the reported figures is, however, a mixed one. The figures for students in the Dental, Medical, and Occupational Therapy programs are believed to be accurate. Those for Licensed Practical Nurse, Medical Technology and Registered Nurse programs are believed to be a mixture of accurate and possibly inaccurate data. The accurate data are believed to constitute 80 to 90 percent of the total, and the possibly inaccurate data are thought to be not very far from the true figures. The

total student enrollment and racial composition figures, are, therefore, reasonable approximations of the true values for the State of Alabama.

The fact that data were obtained at the instructional or lowest administrative level lends a basis to the belief that the figures for total student enrollment and racial composition are good approximations of the correct values. Total student enrollment, rather than recent graduate figures, were used because of the ease of obtaining these data and the fact that some programs run for several years, and data on recent graduates would not reflect up-to-date changes that might be taking place. The obvious disadvantage of using enrollment figures is the possibility of disproportionate percentages by race of those finishing the programs and entering the health care profession. In some instances, data were provided for both measures, and a subjective evaluation of these figures suggested that there is no substantive difference in the attrition by race in the totals for the selected health care professions studied except perhaps in the Licensed Practical Nurse programs. The figures cited are therefore believe to be good estimates of the true values except for the Licensed Practical Nurse profession where the estimate of percentage of Blacks in training may be high by one or two percentage points.

Analysis of the Data

The figures in Table 1 give the current status of selected health care professions (1973-74). At the top professional level there are 1132 dentists of which 33 are Black for 2.92 percent of the total and 2776 physicians of which 69 are Black for 2.49 percent of the total. Student enrollment figures in Table 2 give a total enrollment of 455 for the two Medical (physician) programs in the State; of these students, 24 are Black for 5.27 percent of the total. There is only one Dental program in the State and this program has 240 students currently enrolled of which nine or 3.75 percent are Black. These figures contrast sharply with the 26.23 percent of the population of the State of Alabama (1970) who are Black (Table 2).

An entirely different picture emerges at the next level of professionalism as measured by length of the training programs. There are 4019 students enrolled in Registered Nurse programs of which 811 or 20.18 percent are Black; there are 638 students enrolled in Medical Technology programs of which 74 or 11.60 percent are Black; and there are 34 students in the only program in Occupational Therapy in the State of which five or 14.71 percent are Black (Table 2).

An exmaination of these figures shows that a trend toward increased number of Blacks possibly entering the Registered Nurse

profession (10.89 percent of R.N.s are Black (Table 1) compared to 20.18 percent of students who are Black). This increased percentage may not, however, reflect increased entry into the profession by Blacks. A larger percentage of Black graduates may be leaving the State of Alabama for positions in the profession and not being replaced by incoming Blacks who were trained as R.N.s in other states. This hypothesis is based on observations made while examining personnel files of Registered Nurses for the State of Alabama who have addresses outside the State. It appeared from this superficial examination that a disproportionate number of out-of-state R.N.s who still retain their Alabama license were Black.

The percentage of R.N.s who are Black is less than half of the percent (26.23) of Blacks in the total population for the State of Alabama. However, the larger percentage of Blacks in the training programs could result in a significant increase in the number of Blacks in the R.N. profession in the next five or six years as opportunities for employment opens in the State of Alabama.

No discernable trends in racial composition by length of the R.N. programs were evident (Table 5). An examination of the different levels of R.N. training programs shows that the two-and four-year programs had a higher percentage (20.3 and 26.0, respectively) of Blacks than the three year programs (8.2).

The Medical Technology profession presents an entirely different picture. The total number of workers in this area is 1015, of which 30 or 2.96 percent (Table 1) are estimated to be Black. Current programs leading to a position in this profession show a total enrollment of 638 of which 74 or 11.60 percent are Black (Table 2). These figures again point up the possibility of increases in the future percentage of Blacks in the profession. Some reasons that might keep the percentage from increasing are as follows: Black graduates may take positions outside the State in disproportionate numbers and keep the percentage of Blacks who are practicing the profession in Alabama at the current levels; Blacks may be sidetracked into other professions in greater numbers than Whites because of even greater shortages of Blacks in those areas; Blacks may not be in the surveys because of the possible tendency of Blacks to not join organizations of these types; and finally, Whites may be hired for available openings in Hospitals or Clinics in preference to Blacks because applications are likely to be received from their own graduates where the number of Blacks is quite limited. Hence, the student enrollment figures seem to indicate that Blacks are making progress in entering the Medical Technology profession but the actual number who are practicing in this area indicates that entry into the profession has not yet been achieved in any appreciable number. Further, the short two-year

programs appear to attract a larger percentage (32.9) of Black students (Table 4) than the four-year programs (10.9), but the hospital programs that are also of short duration do not appear to attract Blacks (3.0). Thus, no trend in the percentage of Blacks by length of the educational programs for medical technologists is evident.

The Licensed Practical Nurse profession contains both the largest number of workers and the greatest percentage of Blacks of all the health care professions studied. There are currently 8910 workers (Table 1) in the profession of which 2790 or 31.31 percent are estimated to be Black (Table 2). The student enrollment figures present somewhat the same picture. There were 1608 students enrolled for the 1973/74 year, of which 548 or 34.08 percent are Black. These two ratios likely differ only by such factors as unequal attrition by race and/or the number of trained Licensed Practical Nurses who take positions outside the State of Alabama. This is the only training program area where the unequal attrition by race was evident. These figures compare quite favorably with the 26.23 percent of Blacks in the State population. Again, it is noted that the percentage of the student enrollment that is composed of Black students increases as the length of the educational program required to enter the profession decreases.

The training of a dental hygienist is done primarily under the supervision of a practicing dentist. The trainee is required to spend one year in service to become a dental assistant and a second year as a dental assistant before one can apply for a license to become a dental hygienist. An indoctrination session must be attended by the dentist and the applicant at the University of Alabama in Birmingham at the beginning of the training year. Other training workshops are also held during the year and must also be attended by the applicant. The educational process is somewhat like an apprenticeship, except the Board of Dental Examiners has to certify the applicant as being qualified for entry into the profession. There are 1085 licensed dental hygienists in the State of Alabama, of which it is estimated that 19 or 1.75 percent are Black (Table 1). This figure contrasts sharply with the 26.23 percent of Blacks in the State. This low percentage is probably explained by the fact that most dentists are White and, hence, are likely to employ White trainees. The workshops in Birmingham and the examination procedure may also be related to other factors that tend to discourage Blacks from completing the entire process. Further, one may remain a trainee for an extended period and never apply for a license if the supervising dentist does not require it. In any event, the number and percentage of dental hygienists who are Black are lower than other health care professions which require a similar training period. The

basic difference appears to be in the ease of entry into the other professions through public educational programs, as contrasted with the possible difficulty of obtaining supervisors who will train Blacks in the Dental Hygiene profession, and the costs associated with attending the workshops in Birmingham.

A critical examination of the figures for all health care professions studied leads to three important inferences. The first inference is that the longer the training period, the smaller the percentage of Blacks who ultimately enter into the profession. Factors such as economic costs, delayed acquisition of material benefits, past customs, admission limitations, and likely other reasons surely play important roles in determining this relationship. Additional study would be needed to pinpoint the causal factors behind this observation.

The second inference is that public educational institutions have enrolled a larger percent of Blacks at the lower professional levels as reflected by length of the training programs. Factors related to changes in historical customs and responsiveness of different types of institutions and individuals to these changes likely play important roles in determining this observation. Again, further study is needed to pinpoint the causal factors.

The third inference is the concentration of Black students at a few institutions. Blacks are enrolled in most institutions but the greatest numbers are in the traditional Black educational institutions. This observation raises the question of whether the enrollment of Blacks

at the highest professional levels, as measured by length of the educational programs and which are historically oriented toward the White student, will ever achieve parity with the percent of Blacks in the population. Further study of trends and social changes is needed to answer this question.

Summary

There is a shortage of Blacks in all but the lowest level of the health care professions, as measured by the percentage of Blacks (26.23) in the population for the State of Alabama. Enrollment of Blacks in educational programs that lead to positions in these professions appears to be slowly increasing the proportion of Blacks who will be coming into the job market, with the exception of the Medical Technology area where enrollment figures indicate a possible accelerated increase in the number of Blacks in this profession. These increases will, however, fall short of matching the percentage of Blacks in the State population--except for the Licensed Practical Nurse profession, where the percentage of Blacks (31.31) already exceeds the percentage in the total population of the State by a small amount.

In general, one can deduce that, the longer the educational process, the smaller the percentage of Blacks entering into the profession and vice versa. This concept is illustrated by the percent of Blacks who are actually working in the health care professions studied. These percentages are 2.92 and 2.49, respectively, for dentists and physicians; 10.89 and 12.50 for registered nurses and occupation therapists; and 31.31 for licensed practical nurses. Exceptions to this observation are Dental Hygiene, where entry appears to be difficult, and Medical Technology, where the current student

enrollment of Blacks has increased beyond their level of current employment in this profession.

Further, training programs at educational institutions have a higher percent of Blacks than at hospitals or in apprenticeship-type programs. Apparently, changes in student composition by race is taking place faster at the educational institutions. These percentages are, however, still below the percent of Blacks in the State population in all areas studied except for the Licensed Practical Nurse profession.

It was further noted that at the lower professional levels, as measured by length of the training program, Blacks have largely been trained at formerally all Black institutions with a small percentage of Blacks scattered through most of the other training programs. Exceptions to this observation do, however, exist and will likely increase as time passes.

Table 1
Health Manpower Status of Selected Professions
State of Alabama, June, 1974

Profession	Number of Workers			Percent Black
	Total	Black	Other	
Denistry	1132 (1)	33 (2)	1099	2.92
Dental Hygiene	1085 (1)	19 (2)	1066	1.75
Licensed Practical Nurse	8910 (3)	2790 (4)	6120 (4)	31.31
Medical Technology	1015 (5)	30 (6)	985 (6)	2.96
Occupational Therapy	64 (7)	8 (7)	56 (7)	12.50
Physician, M.D., and D.O.	2776 (5)	69 (8)	2707	2.49
Registered Nurse	8813 (3)	960 (9)	7853 (9)	10.89

(1) Source: Directory of Dentists and Dental Hygienists Licensed in the State of Alabama, Board of Dental Examiners of Alabama, January 1, 1974

(2) Source: Dr. Bernard M. Jefferson, D.D.S., 1630 Fourth Avenue North, Birmingham, Alabama

(3) Source: Miss Betty Tomlin, R.N., Executive Officer, Alabama Board of Nurses, June 19, 1974

(4) Source: Estimated from random sample of 396 personnel cards from files of Licensed Practical Nurses in Alabama, Alabama Board of Nurses, Montgomery, Alabama. (Out-of-state residents excluded from sample. Figures have a 95 percent probability of being accurate to within four percent of true values).

(5) Source: Health Manpower in Alabama, Comprehensive Health Planning "A" Agency, Montgomery, Alabama, July, 1972. (Report compiled by Mr. Loren Miller).

(6) Source: Estimated from sample survey conducted from rosters of Alabama State Society of Medical Technologists (ASSMT) and of American Medical Technologist, Alabama Chapter (AMT) and complete census of Registered Medical Technologists of Alabama (RMT) since 1961, which is the limit of available records.

Continued from Table 1

(7) Source: Ms. Louise T. Philbodaux, President, Joint Alabama/ Mississippi Occupational Therapist Association, 3421-A Sanderner Court, Birmingham, Alabama

(8) Source: Dr. C. R. Nixon, M. D., Birmingham, correspondence with Mr. L. P. Patterson, Executive Director of Medical Association of Alabama, Montgomery, Alabama

(9) Source: Estimated from random sample of 459 personnel cards from files of Registered Nurses in Alabama, Alabama Board of Nurses, Montgomery, Alabama. (Out-of-State residents excluded from sample. Figures have a 95 percent probability of being accurate to within three percent of true values).

Table 2
Summary Statistics for Student Enrollment
in Selected Health Care Professions in
State of Alabama, 1973-74 (1) and Population of
State of Alabama, 1970

	Student Enrollment in Selected Programs				Percent Black
	Total	Black	White	Other	
Dentistry	240	9	230	1	3.75
Physician, M.D. & D.O.	455	24	429	2	5.27
Registered Nurse					
4 yr. programs	1853	481	1369	3	26.0
3 yr. programs	904	74	829	1	8.2
2 yr. programs	1262	256	1002	4	20.3
TOTAL	4019	811	3200	8	20.18
Medical Technology					
4 yr. programs	433	47	384	2	10.9
2 yr. Transfer program	70	23	45	2	32.9
Hospital programs	135	4	125	6	3.0
TOTAL	638	74	554	10	11.60
Occupational Therapy	34	5	29	0	14.71
Licensed Practical Nurse	1608	548	1060	0	34.08
1970 Population State of Alabama (2)	3,444,165	903,467	2,533,831	6,867	26.23

(1) Details in Tables 3, 4, and 5.

(2) Source: Bureau of Business and Economic Research, University of Alabama.

Table 3
Status of Licensed Practical Nurse, Dentistry, Physician, and Occupational Therapy Educational Programs State of Alabama, 1973-74

	Program and School	Total Enrollment	Black	White	Other	Percent Black
	Licensed Practical Nurse					
1.	Alabama Christian College, Montgomery	15	9	6	0	60.0
2.	Ayers State Trade School, Anniston	54	6	48	0	11.1
3.	Bessemer State Technical Institute, Bessemer (a)	367	184	183	0	50.1
4.	Birmingham Metropolitan Area Skill Center	45	40	5	0	88.9
5.	Calhoun Technical Jr. College, Decatur	36	7	29	0	19.4
6.	Drake State Technical School, Huntsville	106	21	85	0	19.8
7.	Gadsden State Technical Trade School, Gadsden	30	7	23	0	23.3
8.	Hobson State Trade School, Thomasville	45	15	30	0	33.3
9.	McArthur State Trade School, Opp	115	19	96	0	16.5
10.	Muscle Shoals Technical Institute	36	4	32	0	11.1
11.	Northwest Alabama State Technical Institute, Hamilton	34	1	33	0	2.9
12.	Nunnelley State Vocational Technical Institute, Childersburg	34	5	29	0	14.7
13.	Opelika State Vocational Technical Institute	82	13	69	0	15.9
14.	Reid State Technical College, Evergreen (b)	39	16	23	0	41.0
15.	Southwest State Technical Institute, Mobile	266	110	156	0	41.3
16.	Sparks State Trade School, Eufaula	27	12	15	0	44.4
17.	Southern Vocational College, Tuskegee	21	18	3	0	85.7
18.	St. Jude Hospital School of Nursing, Montgomery	16	16	0	0	100.0
19.	Trenholm State Trade School, Montgomery (c)	79	30	49	0	38.0
20.	Shelton State Technical Institute (d)	41	11	30	0	26.8
21.	Walker County State Trade School	40	1	39	0	2.5
22.	Wallace State Technical Jr. College, Dothan	36	2	34	0	5.6
23.	George C. Wallace State Technical Community College, Hanceville	44	1	43	0	2.3
	TOTALS	1608	548	1060	0	34.1

Continued from Table 3

Dentistry					
University of Alabama in Birmingham	240	9	230	1	3.8
Physician					
1. University of Alabama in Birmingham	367	21	346	0	5.7
2. University of South Alabama, Mobile (e)	88	3	83	2	3.4
TOTAL	455	24	429	2	5.3
Occupational Therapy					
University of Alabama in Birmingham	34	5	29	0	14.7

(a) Wenonah State Technical and Birmingham Public School Programs Transferred to Bessemer State Technical Institute

(b) Butler County School of Practical Nursing transferred to Reid State Technical College

(c) Patterson State Vocational Technical School Program transferred to Trenholm State Trade School

(d) Was Tuscaloosa State Trade School

(e) New program, first class enrolled in 1973

Table 4
Status of Medical Technology Educational
Programs, State of Alabama, 1973-74

Program and School	Total Enrollment	Black	White	Other	Percent Black
Bachelor of Science, 4 yrs.					
1. Alabama A & M University, Normal	36	29	7	0	80.6
2. Auburn University, Auburn	156	3	153	0	1.9
3. Jacksonville State University, Jacksonville	100 (a)	4 (a)	95 (a)	1 (a)	4.0
4. Judson College, Marion	4	0	4	0	0.0
5. University of Montevallo, Montevallo	33	0	33	0	0.0
6. Spring Hill College, Mobile	10 (a)	0	10 (a)	0	0.0
7. St. Bernard College, Cullman	8	2	6	0	25.0
8. Troy State University, Troy	(b)	(b)	(b)	(b)	(b)
9. University of Alabama in Birmingham	20	1	18	1	5.0
10. University of South Alabama, Mobile	66	8	58	0	12.1
TOTALS	433	47	384	2	10.9
Two Year Transfer Program					
1. Cullman College, Cullman	6	0	5	1	0.0
2. Gadsden State Jr. College, Gadsden	55	14	40	1	25.5
3. S. D. Bishop State Jr. College, Mobile	9	9	0	0	100.0
TOTALS	70	23	45	2	32.9
Hospitals Offering Accredited Professional Education and Clinical Experience					
1. Baptist Medical Center, Birmingham	13	0	12	1	0.0
2. Carraway Methodist Hospital, Birmingham	10	1	9	0	10.0
3. St. Vincents Hospital, Birmingham	8	0	8	0	0.0
4. South Highlands Infirmary, Birmingham	8	0	8	0	0.0
5. UAB Hospitals and Clinics, Birmingham	22	1	20	1	4.5
6. Lloyd Noland Hospital, Fairfiled	12	0	10	2	0.0
7. Holy Name of Jesus Hospital, Gadsden	9	1	8	0	11.1
8. Huntsville Hospital, Huntsville	9	0	8	1	0.0
9. Mobile Infirmary, Mobile	12	0	11	1	0.0

Continued from Table 4

10. Providence Hospital, Mobile	6	0	6	0	0.0
11. St. Margarets Hospital, Montgomery	9	0	9	0	0.0
12. Montgomery Baptist Hospital, Montgomery	7	0	7	0	0.0
13. Druid City Hospital, Tuscaloosa	10	1	9	0	10.0
TOTALS	135	4	125	6	3.0
GRAND TOTALS	638	74	554	10	11.6

(a) Figures are gross estimates as programs exist in the biology area and numbers are constantly changing. Estimates made by instructors in programs.

(b) Figures not provided.

Table 5
Status of Registered Nurse Education Programs
State of Alabama, 1973-74

Program and School	Total Enrollment	Black	White	Other	Percent Black
Bachelor of Science, 4 yrs.					
1. University of Alabama in Birmingham	845	138	706	1	16.3
2. University of Alabama in Huntsville	262	20	242	0	7.6
3. Tuskegee Institute	283	283	0	0	100.0
4. Troy State University, Troy	(a)	(a)	(a)	(a)	(a)
5. Jacksonville State University, Jacksonville	225 (b)	9 (b)	216 (b)	0	4.0
6. University of North Alabama, Florence	150	25	123	2	16.7
7. Samford University, Birmingham	63	5	58	0	7.9
8. University of South Alabama, Mobile	25	1	24	0	4.0
TOTALS	1853	481	1369	3	26.0
Diploma, 3 yrs.					
1. Carraway Methodist Hospital, (c) Birmingham	97	7	90	0	7.2
2. Druid City Hospital, Tuscaloosa	101	2	99	0	2.0
3. Holy Name of Jesus Hospital, Gadsden	31	0	31	0	0.0
4. Mobile General Hospital, Mobile	185	19	166	0	10.3
5. Mobile Infirmary, Mobile (d)	92	1	91	0	1.1
6. St. Margaret's Hospital, Montgomery (e)	48	3	44	1	6.2
7. St. Vincent Hospital, Birmingham	185	19	166	0	10.3
8. Sylacauga Hospital, Sylacauga	41	4	37	0	9.8
9. Providence Hospital, Mobile	124	19	105	0	15.3
TOTALS	904	74	829	1	8.1
Associate Degree, 2 yrs.					
1. Jefferson State Jr. College, Birmingham	248	35	213	0	14.1
2. Gadsden State Jr. College, Gadsden	85	2	83	0	2.4
3. John C. Calhoun State Community College, Decatur	210	41	165	4	19.5
4. George C. Wallace State Community College, Dothan	112	4	108	0	3.6

Continued from Table 5

5. George C. Wallace State Community College, Selma	30	6	24	0	20.0
6. George C. Wallace State Technical Community College, Hanceville	47	0	47	0	0.0
7. Jefferson Davis State Jr. College, Brewton	23	3	20	0	13.0
8. Lawson State Community College Birmingham	113	111	2	0	98.2
9. Northwest Alabama State Jr. College, Phil Campbell	59	1	58	0	1.7
10. Mobile Infirmary, Mobile (f)	102	3	99	0	2.9
11. Oakwood College, Huntsville	42	41	1	0	97.6
12. Samford University (g) Birmingham	191	9	182	0	4.7
13. Troy State University, Troy	(a)	(a)	(a)	(a)	(a)
TOTALS	1262	256	1002	4	20.3
GRAND TOTALS	4019	811	3200	8	20.18

(a) Figures not provided

(b) Figures are estimated, as students are enrolled in and out of program and an exact count is not available

(c) Program being phased out in 1975

(d) Program being phased out in 1976

(e) Program being phased out in 1974

(f) Program starting in 1973

(g) Baptist Medical Center two-year transferred to Samford University